

Division of Public Services and Neighborhoods Memphis Animal Services 2350 Appling City Cove Memphis, TN 38133 (901) 636-1448 FAX (901) 636-1430

APPLICATION FOR VOLUNTEER SERVICE

The information requested on this form is needed to initiate the applicant review process. The information provided will be used by Memphis Animal Services solely for this purpose. Eligibility for volunteer service is considered without regard to race, color, religion, gender, nationality, sexual orientation, disability, marital or veteran status, or any other legally protected status. For safety purposes, volunteers must be at least 18 years of age.

Please provide the requested information accurately and completely. Please print in ink or type.

Name:		Date:		
Home Address:	City:	State:	ZIP Code:	
Home Phone: Cell Phone:	Work Phone (opt	Work Phone (optional):		
Email Address:		Date of Birth:		
Emergency Contact:	Phone:			
1. Do you have any allergies or health problem	ns that may prevent you from certain ac	ctivities? [] Yes	[] No	
2. Please list any special professional training,	, skills, etc. that may help at M.A.S.			
3. Describe history of pet ownership or previo	ous experience with animals.			
Availability: Sun [] Mon [] Tues [] Hrs. Available Day:	Wed [] Thurs [] Fri Evening:	[] Sat [] Weekend:		
I hereby certify that the information set forth in any misrepresentations or falsified statements in discovered.	this application is true and complete to ncluded herein shall be considered suff	the best of my kno icient cause for der	wledge. I understand that ial or dismissal whenever	
I certify that I have read and understand this ent	tire document and I agree that a copy of	f this document is a	s valid as the original.	
Applicant's Signature			/	
Approved:	(For Animal Services use only)			
Denied: Justification:				
By:Administrator Memphis Animal Services	Volunteer Coordinator Memphi	s Animal Srvcs.	/	